

DISTRICT/CHARTER NAME: _____

COUNTY: _____

CTDS: _____

**FY2013
STATE OF ARIZONA
SCHOOL DISTRICT/CHARTER STATEWIDE RECALCULATION ADJUSTMENT**

FY 2013 STATEWIDE RECALCUATION ADJUSTMENT TOTAL _____

AMOUNT OF ADJUSTMENT FOR THE FY2014 _____

AMOUNT OF ADJUSTMENT FOR THE FY 2015 _____

***SUM OF THE FY2014 AND FY2105 ADJUSTMENT SHOULD BE EQUAL TO THE TOTAL AMOUNT
FOR FY2013 STATEWIDE RECALCULATION ADJUSTMENT**

SUPERINTENDENT/BUSINESS MANAGER SIGNATURE

SUPERINTENDENT/BUSINESS MANAGER – PRINTED NAME

TELEPHONE

E-MAIL